HIE Workgroup Meeting Summary

Workgroup:	HIT Taskforce
Meeting Date:	Wed. March 3, 2010
Location:	JL Gilbreath Conference Center, Baptist Health

Agenda Items:

1. Funding Announcements

a. REC

b. HIE

2. Disclosure and Ethical Standards

3. Presentation Protocols

4. Workgroup Status Updates

5. Meaningful Use Presentation

6. Announcement of HIE System Name

Discussion Highlights:

1. Funding Announcements

a. REC

Arkansas Foundation for Medical Care received Notice of Award on February 8th

$7.5 million in funding for first 2 years and $1 million total for years 3 and 4

have 60 days to be up and running and assisting clinicians with purchase of electronic medical records

Barrier-AFMC needs to narrow down the list of potential HIE systems and negotiate on behalf of providers

AFMC is the quality assurance organization for the state of Arkansas for Medicare and the Center for Medicare and Medicaid Services sees limiting HIE vendors as a potential breach of control. This issue needs to be resolved

b. HIE

$7.9 million awarded and a statch match of $600,000 was appropriated

4 year grant to help cover part of the cost for developing and implementing the HIE

2. Disclosure and Ethical Standards

Executive Committee voted to adopt standards as a potential conflict of interest could arise during the procurement process

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Important to have HIE vendors in the room to provide their knowledge during the strategic planning phase but would need to be excluded during the procurement phase
Those attending meetings, participating in workgroups and the Task Force need to sign the disclosure form once in oder to determine if a possbile conflict of interest may arise
3. Work Group Updates
a. Governance (Keith Vire)
Frank Scott provided guidance form the Governor's Office for this process-need to set up the HIE and allow for a governance model to be flexible as we do not know how the HIE will evolve over the next 3-5 years
Consensus on a 2 phase approach: phase 1 calls for a state led model similar to that proposed in the grant with an Office of HIE and HIE Council; phase 2 would evolve into a public/private model with a Board/Commission
b. Technical Infrastructure (Blake Perry)
Group identified their members and discussed their backgrounds and experience with HIE and information technology
Held discussions with Jefferson Regional Medical Center and University of Arkansas for Medical Sciences about the possibility of a pilot project to exchange medical records from Pine Bluff to Little Rock
c.Business and Technical Operations (George Platt)
2 challenges: easy to slip into operational model for HIE rather than the strategic plan; concern that the HIE may rebuild what many have already done
Created a business model and looked at what are the elements of HIE: Master Patient Index, Record Locator Service, Security, Policy, Infrastructure
Determined users of the system: payers, public health, providers, citizens
d. Finance (Jason Lee)
Reviewed 3 state financing models: New York, Vermont, Delaware
Will look at public/private financing examples (Connect Arkansas and the Information Network of Arkansas)
Will look at the benefits of the system
3. Meaningful Use
Meaningful Use requirements will drive payment incentives for Medicaid and Medicare providers
Medicare has a total incentive of $44,000 per provider

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Medicaid has a total incentive of $63, 750 per provider
Providers have to choose between either Medicare of Medicaid for reimbursement bur can switch once within 4 years
Meaingful use broken down into 3 stages:
Stage 1 begins in 2011-clinicians will have to electronically capture health information; this information will be used to track key clinical conditions; information for care coordination; initiate the reporting of clinical quality measures and public health information
Clinicians will have to demonstrate that they can transmit data to the health department or other providers at least once during stage 1
4. **HIE System Name**
SHARE-State Health Alliance for Records Exchange

Dependencies:

Completed Tasks:

Next Steps: Activities defined for next meeting
All task force members need to complete and sign the disclosure form

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